

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.

Print your name and address on the reverse
of this card to the back of the envelope.

or on the front if space permits.

DE 23

Pepper & Peach, LLC

Byron M. Gill

Rochelle, McCulloch, & Aulds, PLLC

109 N. Castle Heights Avenue

Lebanon, TN 37087-2738



3016 3010 0000 4887 2292

(over \$50)

1. Article Number (Transfer from service label)		JAN 28 2022	
2. Article Number (Transfer from service label)		in Clerk's Office	
Lebanon, TN 37087-2738			

COMPLETE THIS SECTION ON DELIVERY

A. Signature **X** **BY C-19**

□ Agent

□ Addl

B. Received by (Printed Name)

C. Date of Deliv

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

3. Service Type	□ Priority Mail Express®
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Registered Mail™
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail Restricted Delivery
<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Return Receipt for
<input type="checkbox"/> Certified Mail Restricted Delivery	<input type="checkbox"/> Merchandise
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation™
<input type="checkbox"/> Collect on Delivery Restricted Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery
<input type="checkbox"/> Mail	
<input type="checkbox"/> Mail Restricted Delivery	

Domestic Return Receipt